

ARTICLES OF ORGANIZATION

DOMESTIC LIMITED LIABILITY COMPANY

Office of the Secretary of the State

30 Trinity Street/P.O. Box 150470 / Hartford, CT 06115-0470 / 11/06/2001

See reverse for instructions

Space for Office

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SECRETARY OF THE STATE
CONNECTICUT SECRETARY OF THE STATE

1. NAME OF THE LIMITED LIABILITY COMPANY.

Woodstock Counseling Services LLC

**2. NATURE OF BUSINESS TO BE TRANSACTED OR THE PURPOSE TO BE
PROMOTED OR CARRIED OUT:**

To engage in any activity which is permitted under Connecticut statutes.

3. PRINCIPAL OFFICE ADDRESS: (Provide complete address. See instructions for further details.)

207 Route 169, Woodstock, CT 06281

4. APPOINTMENT OF STATUTORY AGENT FOR PROCESS:

Name of agent:

*Christopher E Teehan
Attorney at Law*

Business address: (P.O.Box is not acceptable)

*112 Main Street, Suite 4
Putnam, CT 06260*

Residence address: (P.O.Box is not acceptable)

*98 Cooney Road, POB 225
Pomfret Center, CT 06259*

Acceptance of appointment

Signature of agent

5. MANAGEMENT:

(Place a check mark next to the following statement **only** if it applies)

The management of the limited liability company shall be vested in one or more managers.

6. MANAGER(S) OR MEMBER(S) INFORMATION

Name	Title	Residence Address	Business Address
<i>Donald MacMillan</i>	<i>Member</i>	<i>207 Route 169 Woodstock, CT 06281</i>	<i>207 Route 169 Woodstock, CT 06281</i>

7. EXECUTION

Dated this *8th* day of *July* 2004.

Donald MacMillan

Print or type name of organizer

Signature

Reference and 8 x 11 attachment if additional space is required